Members

Rep. Charlie Brown, Chairperson Rep. Cindy Noe Sen. Connie Lawson Sen. Vi Simpson Robert N. Postlethwait Valerie N. Markley Amy Cook-Lurvey Richard Culver Abigail Flynn Donna Lisa Gibson David M. Giles, M.D. Galen Goode Dennis R. Jones Gloria Kardee Loretta Kroin



COMMISSION ON MENTAL HEALTH

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MEETING MINUTES¹

Meeting Date: September 21, 2004

Meeting Time: 1 P.M.

Meeting Place: State House, 200 W. Washington St.,

House Chambers

Meeting City: Indianapolis, Indiana

Meeting Number: 2

Members Present: Rep. Charlie Brown, Chairperson; Rep. Cindy Noe; Sen. Connie

Lawson; Robert N. Postlethwait; Valerie N. Markley; Amy Cook-Lurvey; Richard Culver; Abigail Flynn; David M. Giles, M.D.; Galen Goode; Gloria Kardee; Loretta Kroin; Bryan Lett; David Thomas.

Members Absent: Sen. Vi Simpson; Dennis R. Jones; Donna Lisa Gibson.

I. Welcome

II. Presentation by Ms. Suzanne Clifford, Director, Division of Mental Health and Addiction (DMHA), Family and Social Services Administration (FSSA)

Ms. Clifford provided the Commission with the annual DMHA update. Her presentation included information covering the following topic areas: (1) mental health is essential to overall health; (2) people with mental illness are not the problem, the issue is the absence of treatment; (3) stigma and access to treatment are the greatest barriers to recovery; (4) there is scientific evidence that prevention, early intervention, and treatment of mental illness and substance abuse works and is cost effective; (5) the demand for mental health and substance abuse treatment far exceeds the supply; and (6) DMHA is currently focusing on the following key priorities: children, employment, and recovery outcomes (Exhibit 1).

Representative Brown asked a question about the need for legislation to implement the Crisis

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Intervention Team (CIT) training program statewide. Ms. Clifford responded by saying, yes, there is a need for legislation. However, that both good and bad things would result in its passing. The legislation would be good because it would divert more mentally ill individuals away from the criminal justice system. The legislation would be bad because it would increase the size of the mental health population, and funding would be an issue.

III. Presentation by Mr. Joseph Vanable, President, National Alliance for the Mentally III Indiana

Mr. Vanable discussed the need for increased access to treatment for individuals with serious mental illnesses (Exhibit 2). Currently, treatment for serious mental illness is accessible to approximately half of those needing it.

IV. Presentation by Ms. Suzannah Wilson Overholt, Deputy Corporation Counsel, City of Indianapolis.

Ms. Overholt provided the Commission with a copy of the "Report on the Review of the January 20, 2004, Detention of Kenneth C. Anderson and its Aftermath (Exhibit 3)." The report investigates how the law, the Indianapolis Police Department's policies, and community actions played a role in incidents which occurred on August 18, 2004, involving the death of one Indianapolis police officer and the injury of four others, and the death of Kenneth Anderson and his mother. The report concludes with a list of recommendations.

Representative Brown asked Ms. Overholt if the city had prepared any legislation, or had any intent to do so, regarding its recommendations that are listed in the report. Ms. Overholt responded that the city has not and does not have any plans to do so at this time. Representative Brown then suggested that the Commission create a work group to analyze the report and create legislative suggestions. The Commission agreed. The work group will meet on September 29 at 1:30 p.m. in Room 156 A of the State House. Judge Culver will head the work group, while Abigail Flynn, David Thomas, Robert Postlethwait, and Galen Goode will participate.

V. Presentation by Representative Robert Behning

Representative Behning spoke about his experiences with both the Department of Corrections (DOC) and mental health arenas. The experiences are the result of issues relating to his 12-year-old daughter who was recently diagnosed as Seriously Emotionally Disturbed (SED). Representative Behning stated that he and his wife were forced to involve the juvenile justice system because mental health services were not available for her through the state, and he and his wife were unable to afford the necessary services themselves. He stated that there are two problems: (1) lack of services and (2) services that are available are not easily identifiable by consumers. Representative Behning stated that he had come to the meeting to address the Commission because he would like to continue as an advocate for children's mental health issues.

VI. Presentation by Mr. Daryl Hall, Director of Juvenile Programs, DOC; Mr. Dean Reager, Director of Health Services, DOC

Mr. Hall provided a brief overview of juveniles with mental illnesses that are a part of the correctional system. Mr. Hall stated that DOC essentially views all juvenile offenders as having some sort of mental health issue. The youth are reviewed for a period of 14 days at intake. The review focuses on three principles: risk, need, and responsitivity. On occasion, the DOC civilly commits a youth if it is unable to provide the necessary services. Last year, 5 youth were civilly committed.

Mr. Reager followed Mr. Hall's overview with additional information about the intake process (Exhibit 4). Specifically, he discussed issues relative to psychotropic medication and the Department's handling of youth that are already being medicated at intake. Currently, 13% of the DOC juvenile population is provided psychotropic medication.

VII. Next Meeting

The next and final meeting will be held Thursday, October 28, at 10 a.m., in the House Chambers of the State House.

VIII. Closing

Commission members voted to adjourn the meeting and move the remaining agenda items to the next Commission on Mental Health meeting.